

Work Order ID 88761

August-02-12 7:52:14 AM

\*88761\*

PRELIMINARY ISSU

Page 1

Item ID: D4634-1

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID: PRELIM

Stop \*NS2\*

Item Name: Fwd Ceiling Panel, Center

Start Date: 02/08/2012 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 16/08/2012 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/08/02 Tooling:

Date:

Run Start \*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4634

PB2

100

0.00

\*100\*

HAND FINISHING THERMOFORMING

Thermoform

Memo

0.00

Thermoforming Machine

Cut Blanks

x.1

DL  
12/08/07

105

0.00

\*105\*

Dry Material

HandThermo

Memo

0.00

Hand Finishing Thermoforming

Dry Sheet as per QSI022 KYDEX

Temp: 150° F

Time IN: 2:00 pm 12/08/06

Time OUT: 12/08/07

- NO cutouts  
- Back marks  
- 20 2.030" holes

DL  
12/08/07

m 12/17/03

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

**\*88761\***

Page 2

\*N900040100\*

Setup Start \*NS1\*

Stop \*NS2\*

**Start Date:** 02/08/2012      **Start Qty:** 1.00

**\* 1 \***

**Cust Item ID:**

**Required Date:** 16/08/2012      **Req'd Qty:** 1.00

**\* 1 \***

**Customer:**

**Reference:**

**Approvals:**

### Process Plan:

Date:

**Tooling:**

Date:

Run Start \*NR1\*

**QC:**

Date:

**SPC (Y/N):**

Date:

Stop \*NR2\*

[illegible]

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 88761

August-02-12 7:52:14 AM

**\*88761\***

Page 3

Item ID: D4634-1

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID: PRELIM

Stop **\*NS2\***

Item Name: Fwd Ceiling Panel, Center

Start Date: 02/08/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 16/08/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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140 QC2- Inspect parts off machine FAI/FAIB

0.00

**\*140\***

QC Memo

0.00

Quality Control

81

Wh  
12/02/08

150 QC5- Inspect part completeness to step on W/O

0.00

**\*150\***

QC Memo

0.00

Quality Control

DAS  
16  
12/02/08

160 Packaging

0.00

**\*160\***

Packaging Memo

0.00

Packaging

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	
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**Work Order ID 88761****\*88761\***

Page 4

Item ID: D4634-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID: PRELIM

Stop **\*NS2\***

Item Name: Fwd Ceiling Panel, Center

Start Date: 02/08/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 16/08/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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170

QC21- Final Inspection - Work Order Release

0.00

**\*170\***

QC

Memo

0.00

Quality Control

R12089

POSITIVE RECALL

EFFECTIVE

AUTH

RELEASED

DATE

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		



# Picklist Print

August-02-12 7:52:17 AM

Page 1

Work Order ID: 88761

\*88761\*

Parent Item: D4634-1

\*D4634-1\*

Parent Item Name: Fwd Ceiling Panel, Center

Start Date: 02/08/2012

Required Date: 16/08/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev.A New Issue 12/05/07 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MKYD6185S.080-P3-62015		Purchased	No			100	sf	1,495.838	12.93	14.36667			

\*MKYD6185S 080-P3-62015\*

6185 KYDEX .080"

\*\*

Location

Loc Qty

Loc Code

therm

1495.838377

116576

386.505377

121755

1109.333

14.37 sq ft.

OK  
17/08/08

NCR: Yes / No

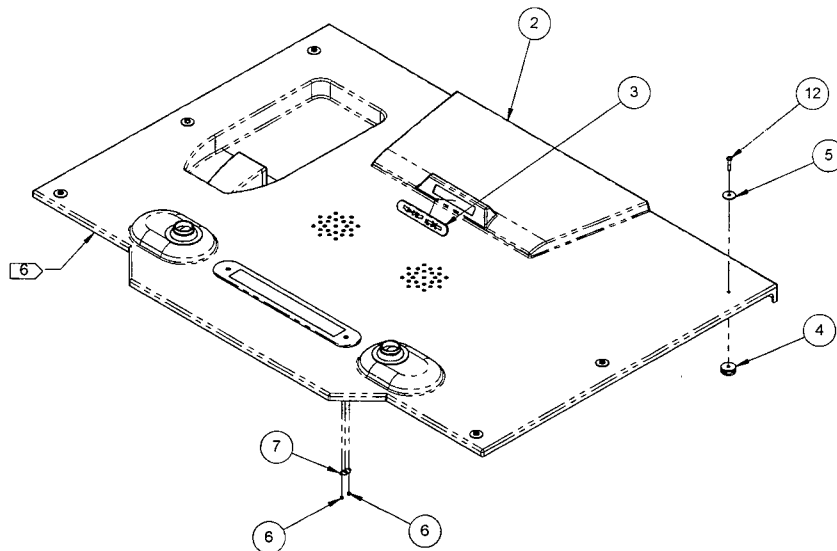
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <span>Rework <input type="checkbox"/></span> <span>Skid-tube <input type="checkbox"/></span> <span>Crosstube <input type="checkbox"/></span> <span>Water Jet <input type="checkbox"/></span> <span>Engineering <input type="checkbox"/></span> </div> <div style="display: flex; justify-content: space-around;"> <span>Scrap <input type="checkbox"/></span> <span>Machining <input type="checkbox"/></span> <span>Small Fab <input type="checkbox"/></span> <span>Prod. Eng. Coord. <input type="checkbox"/></span> <span>Quality <input type="checkbox"/></span> </div> <div style="display: flex; justify-content: space-around;"> <span>Use-as-is <input type="checkbox"/></span> <span>Thermoforming <input type="checkbox"/></span> <span>Finishing <input type="checkbox"/></span> <span>Rec/Store/Packaging <input type="checkbox"/></span> <span>Other <input type="checkbox"/></span> </div> <div style="display: flex; justify-content: space-around;"> <span>Work Order Update <input type="checkbox"/></span> <span>Large Fab <input type="checkbox"/></span> <span>Composite <input type="checkbox"/></span> <span>Supplier <input type="checkbox"/></span> </div>								
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							



**D4634-041 FWD, CENTER CEILING PANEL ASSY**

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 7.40 lbs

ITEM NO.	QTY. -041	PART NUMBER	DESCRIPTION
1	X	D4634-041	FWD, CENTER CEILING PANEL ASSY
2	1	D4634-1	FWD, CENTER CEILING PANEL
3	1	D4645-1	NO SMOKING & FASTEN BELT SYMBOLS
4	6	D4664-041	SPACER ASSEMBLY
5	6	AN970-3	WASHER
6	4	MS20426AD3-3	RIVET
7	2	MS21059L3	ANCHOR NUT
8	1	D4638-1	LED LIGHT
9	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE
10	2	D4646-1	PLENUM CAP ASSEMBLY
11	1	D4694-1	CHANNEL
12	6	MS27039-1-15	SCREW
13	2	MS24694-S5	SCREW

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 88761 MLT  
12/08/02

**PRELIMINARY ISSUE**

# 12.07.25

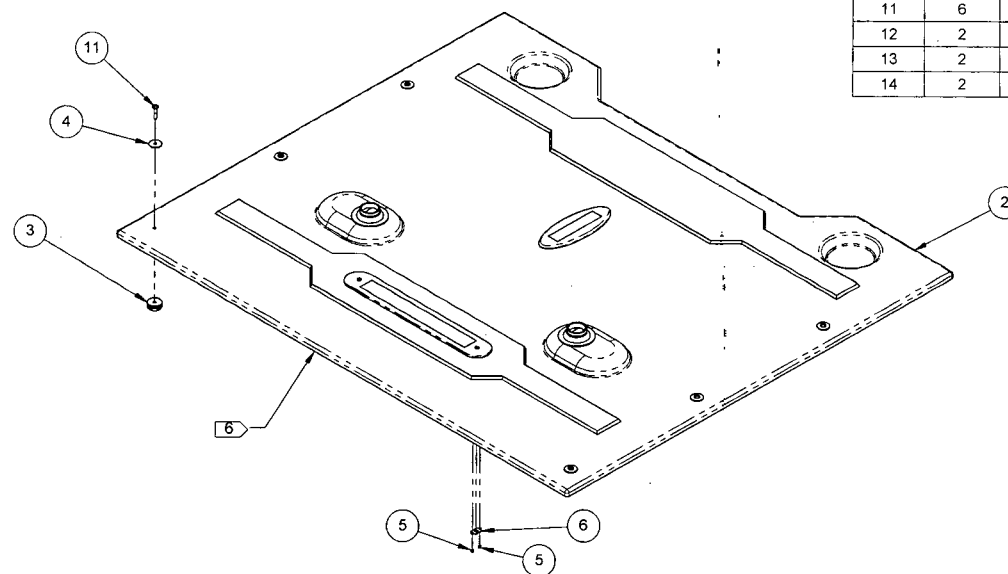
PB2	MOLD STIFFENER REMOVE ON D4634-1; MOVE ON D4634-3	RF	12.07.25
A	NEW ISSUE	RF	12.04.04
REV.	DESCRIPTION	BY	DATE
DESIGN	RF		
DRAWN	RF		
CHECKED	#		
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.07.25		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D4634** REV. PB2  
SHEET 1 OF 11  
TITLE **CENTER CEILING PANELS** SCALE NTS

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ITEM NO.	QTY.	PART NUMBER	DESCRIPTION
1	X	D4634-043	MIDDLE, CENTER CEILING PANEL ASSY
2	1	D4634-3	MIDDLE, CENTER CEILING PANEL
3	6	D4664-041	SPACER ASSEMBLY
4	6	AN970-3	WASHER
5	4	MS20426AD3-3	RIVET
6	2	MS21059L3	ANCHOR NUT
7	1	D4694-3	CHANNEL
8	1	D4694-5	CHANNEL
9	1	D4701-1	EMERGENCY LED LIGHT
10	1	D4638-1	LED LIGHT
11	6	MS27039-1-15	SCREW
12	2	MS24694-S5	SCREW
13	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE
14	2	D4646-1	PLENUM CAP ASSEMBLY



**D4634-043 MIDDLE, CENTER CEILING PANEL ASSY**

**PRELIMINARY ISSUE**

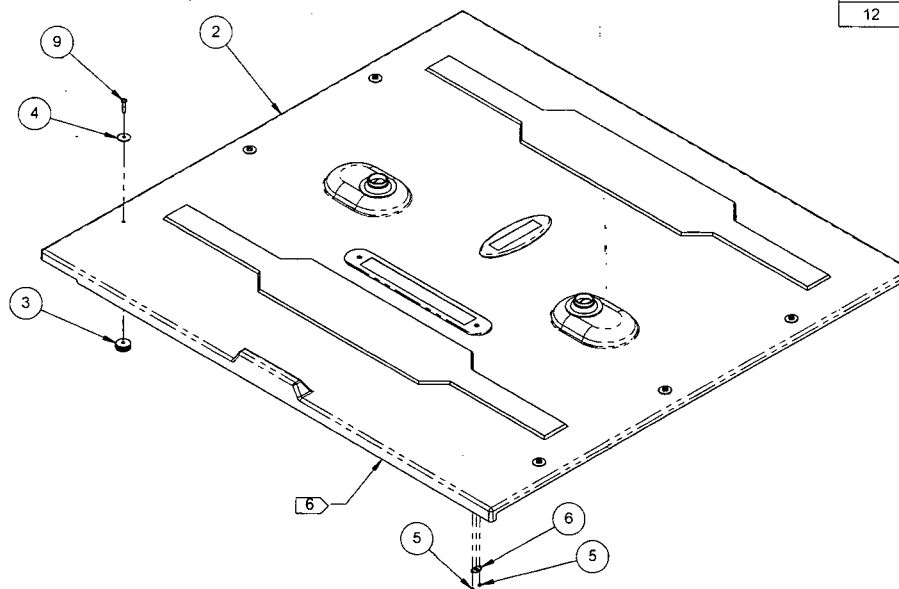
12.07.25

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 8.89 lbs

DESIGN	RF	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	RF	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 2 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
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ITEM NO.	QTY. -045	PART NUMBER	DESCRIPTION
1	X	D4434-045	AFT, CENTER CEILING PANEL ASSY
2	1	D4634-5	AFT, CENTER CEILING PANEL
3	6	D4664-041	SPACER ASSEMBLY
4	6	AN970-3	WASHER
5	4	MS20426AD3-3	RIVET
6	2	MS21059L3	ANCHOR NUT
7	1	D4701-1	EMERGENCY LED LIGHT
8	1	D4638-1	LED LIGHT
9	6	MS27039-1-15	SCREW
10	2	MS24694-S5	SCREW
11	2	D4646-1	PLENUM CAP ASSEMBLY
12	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE



**D4634-045 AFT, CENTER CEILING PANEL ASSY**

**PRELIMINARY ISSUE**

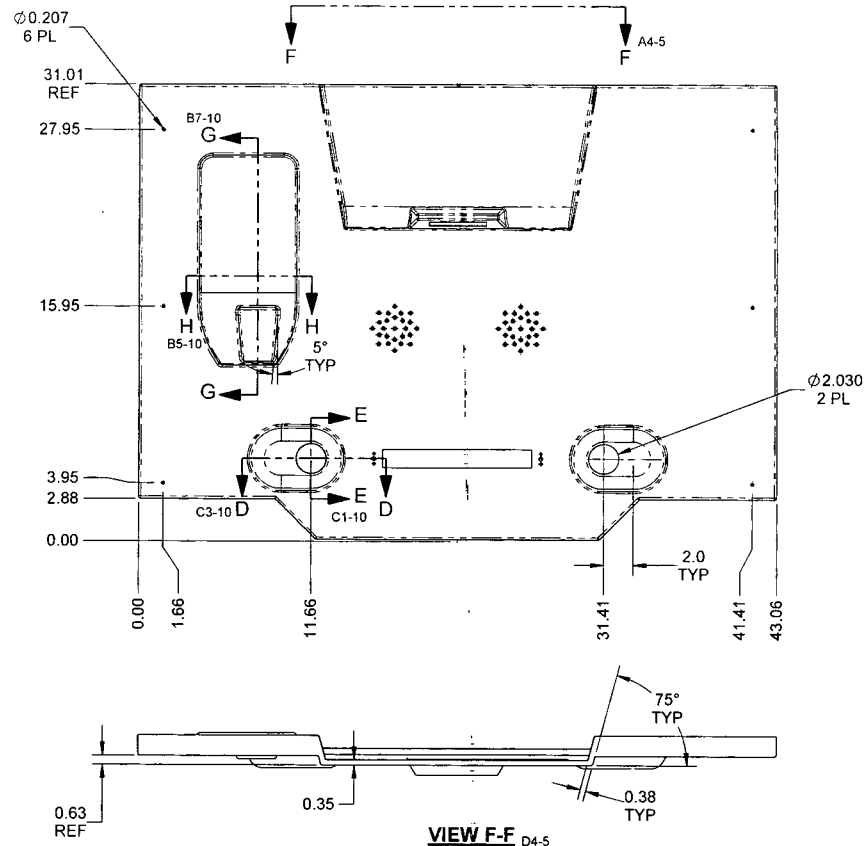
*RF* 12.07.25

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 8.19 lbs

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>RF</i>	DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4634</b>	SHEET 3 OF 11
APPROVED		TITLE	SCALE
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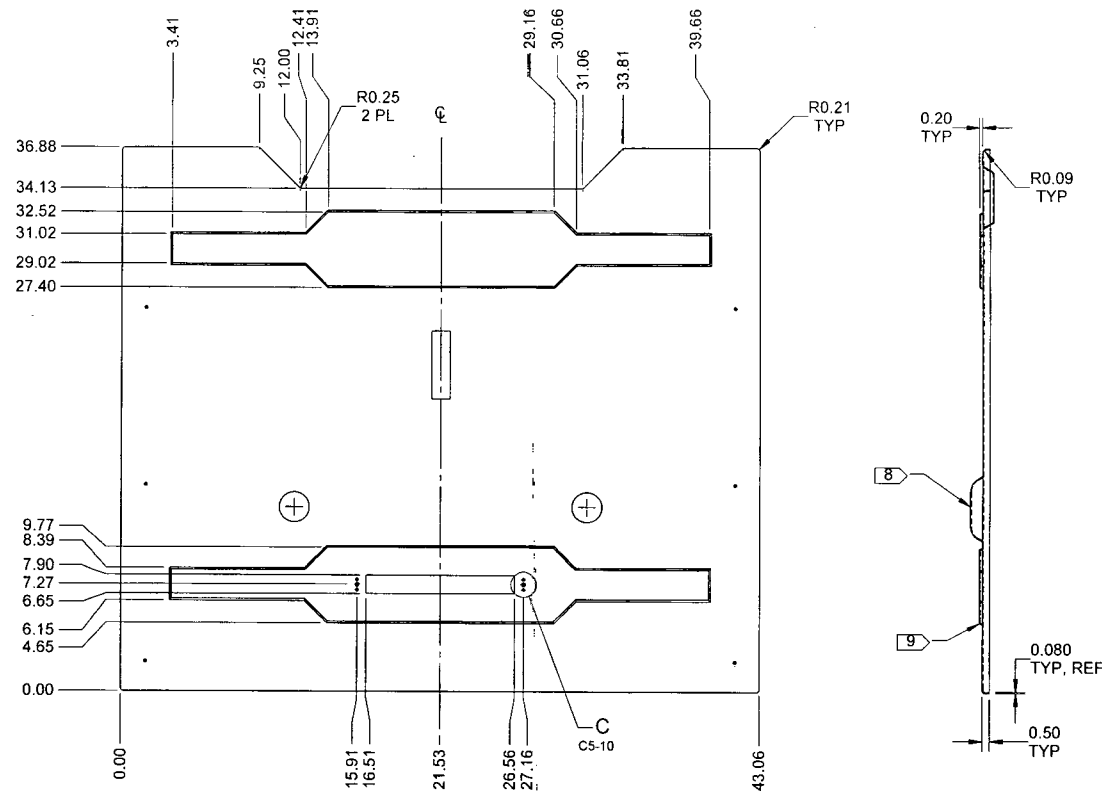




**VIEW F-F** D4-5

**D4634-1 FWD. CENTER CEILING PANEL**  
AUXILIARY VIEW

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4634</b>	SHEET 5 OF 11
APPROVED		TITLE	SCALE
DE APPR.		<b>CENTER CEILING PANELS</b>	NTS
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# **D4634-3 MIDDLE, CENTER CEILING PANEL**

**PRELIMINARY ISSUE**

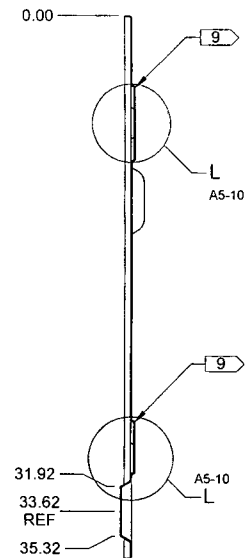
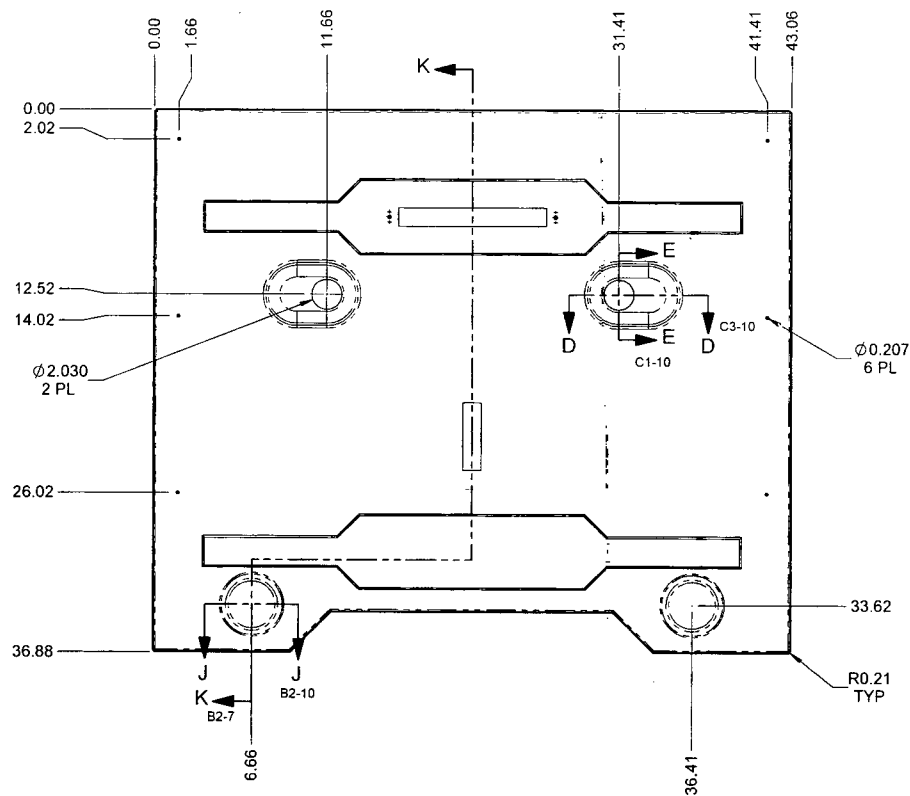
12.07.25

## **NOTES:**

- 1) MATERIAL: KYDEX 6185 SHEET, 0.080 THICK, P3-VELOUR MATTE, IVORY #62015  
PER DART SPEC MKYD6185S.080-P3-62015
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 6.30 lbs
- 8) TEXTURE ON THIS SIDE
- 9) 0.14 RADIUS NOT SHOWN FOR CLARITY

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF	DRAWING NO.	REV. PB2
CHECKED		<b>D4634</b>	SHEET 6 OF 11
MFG. APPR.		TITLE	SCALE
APPROVED		<b>CENTER CEILING PANELS</b>	NTS
DE APPR.		COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DATE	12.07.25		





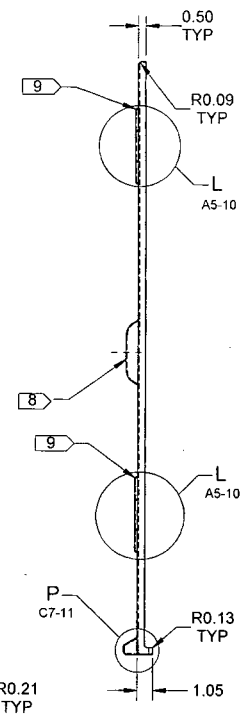
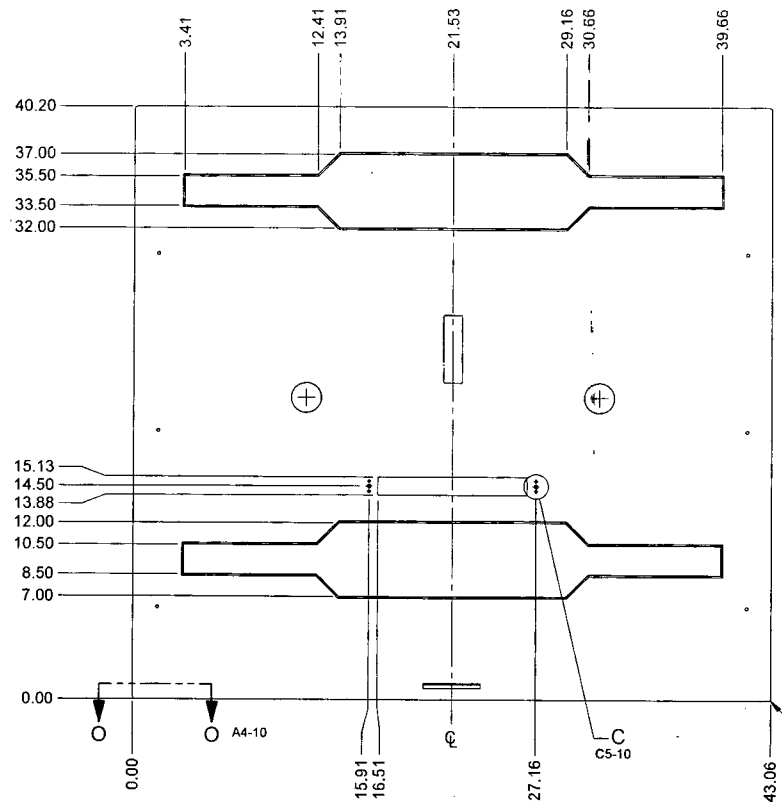
**SECTION K-K** B6-7

**D4634-3 MIDDLE, CENTER CEILING PANEL**  
AUXILIARY VIEW

**PRELIMINARY ISSUE**

12.07.25

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4634</b>	SHEET 7 OF 11
APPROVED		TITLE	SCALE
DE APPR.		<b>CENTER CEILING PANELS</b>	NTS
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**D4634-5 AFT, CENTER CEILING PANEL**

**PRELIMINARY ISSUE**

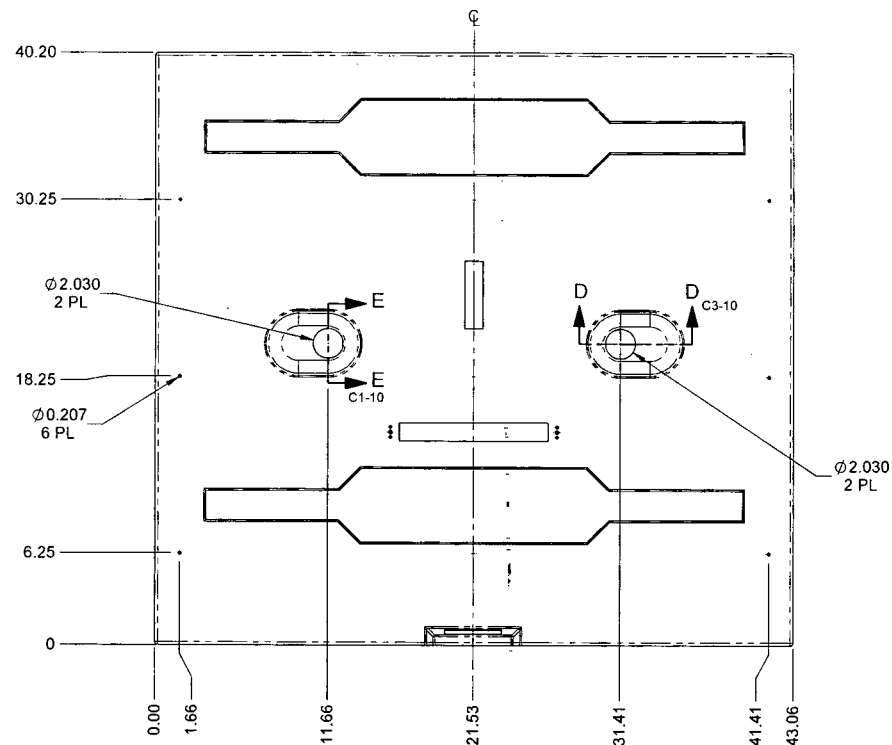
12.07.25

**NOTES:**

- 1) MATERIAL: KYDEX 6185 SHEET, 0.080 THICK,  
P3-VELOUR MATTE, IVORY #62015  
PER DART SPEC MKYD6185S.080-P3-62015
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 7.19 lbs
- 8) TEXTURE ON THIS SIDE
- 9) 0.14 RADIUS NOT SHOWN FOR CLARITY

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4634</b>	SHEET 8 OF 11
APPROVED		TITLE	SCALE
DE APPR.		<b>CENTER CEILING PANELS</b>	NTS
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88761

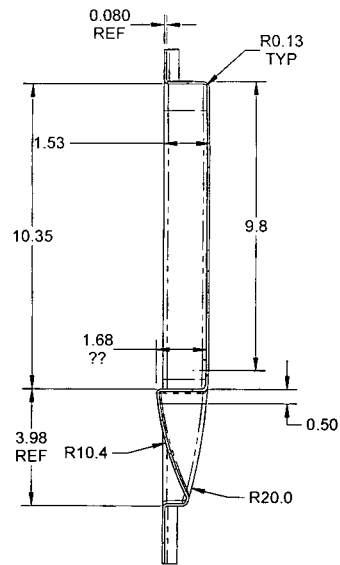


**D4634-5 AFT, CENTER CEILING PANEL**  
AUXILIARY VIEW

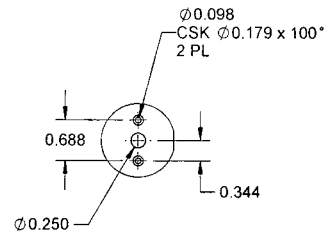
**PRELIMINARY ISSUE**

12.07.25

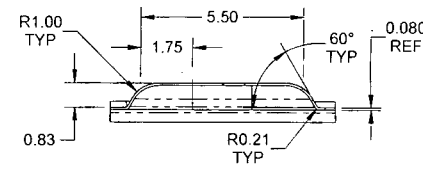
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DRAWN	RF		
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MFG. APPR.		<b>D4634</b>	SHEET 9 OF 11
APPROVED		TITLE	SCALE
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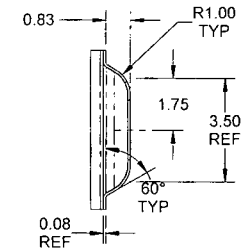
**SECTION G-G**  
SCALE 4X C5-5



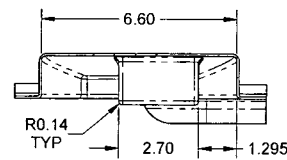
**DETAIL C**  
SCALE 4X B7-4  
B4-6  
B4-8



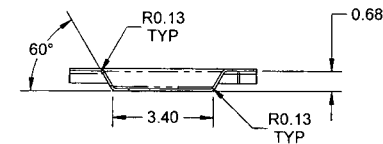
**SECTION D-D**  
SCALE 2X B6-5  
C4-7  
C4-9



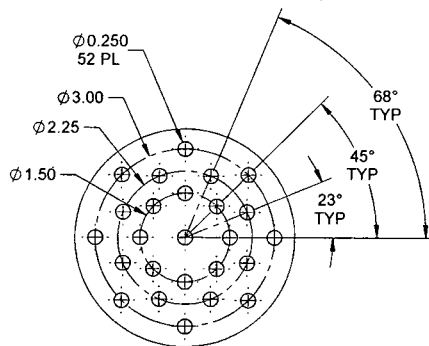
**SECTION E-E**  
SCALE 4X B5-5  
C4-7  
C5-9



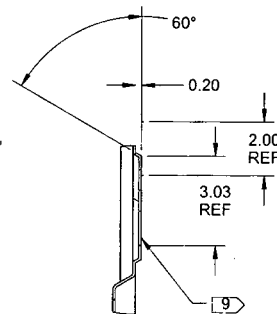
**SECTION H-H**  
SCALE 2X C5-5



**SECTION J-J**  
SCALE 2X B6-7



**DETAIL B**  
SCALE 4X B7-4  
2 PL

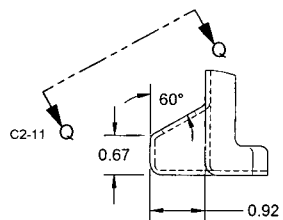


**DETAIL I**  
SCALE 4X TYP B2-7  
C2-7  
B2-8  
C2-8

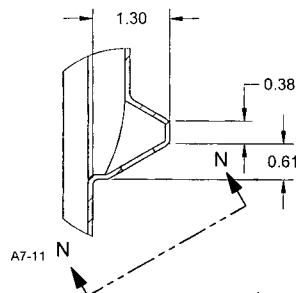
**PRELIMINARY ISSUE**

12.07.25

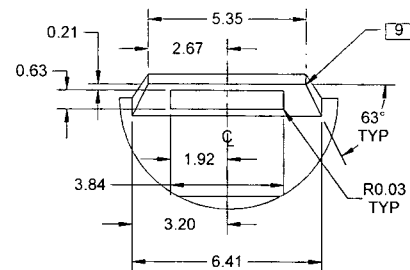
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DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG APPR.		<b>D4634</b>	SHEET 10 OF 11
APPROVED		TITLE	SCALE
DE APPR.		<b>CENTER CEILING PANELS</b>	NTS
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**DETAIL P**  
SCALE 2X B3-8

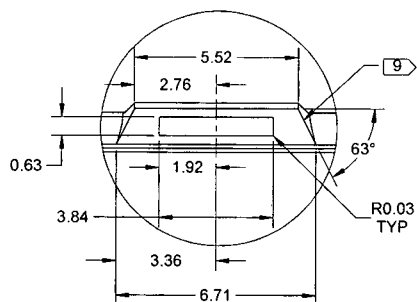


**DETAIL M**  
SCALE 2X C3-4

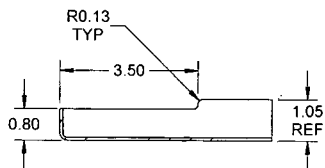


**DETAIL Q**  
SCALE 0.5X D8-11

88761



**DETAIL N**  
SCALE 0.5X C5-11



**SECTION O-O**  
SCALE 1.3X B6-8

**PRELIMINARY ISSUE**

12.07.25

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		<b>D4634</b>	SHEET 11 OF 11
APPROVED		TITLE	SCALE
DE APPR.		<b>CENTER CEILING PANELS</b>	NTS
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<b>DART AEROSPACE LTD</b>	<b>Work Order:</b>	88761
<b>Description:</b> 139 Galing Panel CFWD	<b>Part Number:</b>	D4634-1
<b>Inspection Dwg:</b> D4634 Rev: PB2.		Page 1 of 1

**FIRST ARTICLE INSPECTION CHECKLIST**  
**THERMOFORMING SECTION**

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than <u>N/A</u>				
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

Measured by: WHL Date: 17/08/08

**TRIMMING SECTION**

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
0.50"		0.525"	✓		Visual DL-02	
1.30"		1.379"	✓		Visual DL-02	
0.35"		0.351"	✓		Visual DL-02	

Measured by: WHL Date: 17/08/08

Audited by: (DAS) 17/08/08 Date:                     

Preliminary Approval: 16 9-09 Date:                     

Rev	Date	Change	Revised by	Approved
B	10.04.14	Added preliminary approval	KJ	

*10.04.14*

## Daryl Leger

---

**From:** Roberto Fuentes <rfuentes@dartaero.com>  
**Sent:** Friday, August 03, 2012 12:53 PM  
**To:** Daryl Leger  
**Subject:** Regarding A139 panels

Hi Daryl,

We talking to Harvey the other day regarding A139 panels drawing, the drawing was done to get part/mold make up, now there are ok, we thinking eliminate few of those because much control by mold have a note say regarding about that and this makes easy for QC less dimension to check in the future. For most I need is trim dimensions and oval dimensions. Thinking about that, let me know if make sense to you?

Roberto

# Receiving Report

Date:

12/5/15

Supplier:

SABIC

Packing Slip:

Yes ☒ No ☐

Invoice:

Yes ☐ No ☒

Receipt:

Cash ☐ Cr ☒

Batch No:

M121 758

Dart P/O:

16709

Release Note Attached:

Yes ☒ No ☐ N/A ☐

Waybill Attached:

Yes ☐ No ☐ N/A ☐

Shipment Complete:

Yes ☒ No ☐ N/A ☐

QC6 Inspection

☒ N/A ☒

Work Order

87705/15

Discrepancies		Quantity	Quantity	Quantity	Quantity	Comments
Part Number	Description	Ordered	Received	Returned	Short	

Initials of receiver (if shipment OK) Level 12

*[Signature]*

Production/Admin:

Date

Received/Costing

Initial

12/5/15  
*[Signature]*

Location





\*\*\* SHIPPED \*\*\*

A/C 14.76

SABIC Polymershapes  
1250 Old Innes Rd., Unit 519

Page: 1

Ottawa, Ontario K1B 5L3  
PST 85637 2750 TRO001  
PHONE: (613)745-7043 FAX: (613)745-4291

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada  
1-613-632-5200

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDD
001101	DARAR	CHARGE GST	6112-5207	NET 30 DAYS	13.04.12		dixonw	11.05.12
Ship.Doc.No	Salesrep	Customer P.O.#	Shipped Via	F.O.B.	Freight Terms		Inv. No.	Ship Date
01	93	16709	T S T		COLLECT			11.05.12

Ln# Location Ord B/O Ship Sku Product Code

Description U/Price

\*\*\*\*\*  
DELIVERIES TO BE DONE BEFORE  
4:00 PM , ADVISE SHIPPING CO.  
\*\*\*\*\*

001 31 31 0 SHT 40610813

KYDEX 6185 - P3 - STEEL GREY- 52068  
.080 X 52 X 96

32

32

003 1 0 1 BA 0000005

THANK YOU FOR SELECTING  
SABIC POLYMERSHAPES

Quoted Dart both qty's  
They will take one or the other

*P44/10*

LINE No.	RECEIVING No.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE
					11/5/12		

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS.  
ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

SABIC  
Innovative  
Plastics™

سابك  
sabic

## CERTIFICATE OF COMPLIANCE

SOLD TO: Dart Aerospace.

DATE: May 11, 2012

YOUR PURCHASE ORDER: 16709

SABIC INVOICE NO: O101086

SABIC SALES ORDER NO: O01101

SABIC POLYMERSHAPES LINE ITEM # 001

QUANTITY: Thirty-Two (32) Sheets

DESCRIPTION: Kydex 6185 - P3 - Steel Grey - 52068

The Kydex 6185 sheets on the above noted C of C were manufactured in accordance with FAR 25.853.

AUTHORIZED REPRESENTATIVE SIGNATURE

*Wade Dixon*

Wade Dixon

1250 Old Innes Road  
Unit 519  
Ottawa, Ontario  
K1B 5L3

T: 613-745-7043  
F: 613-745-4291  
E: wade.dixon@sabic-ip.com  
www.sabic-ip.com



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO16709

Purchase Order Date 4/13/12

PO Print Date 4/13/12

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES  
C/O T08722C/U  
PO BOX 8722 STN A  
TORONTO, ON M5W 3C2  
CA

Contact Name

Vendor Phone 800 267 1575

Vendor Fax 613 745 4291

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA



Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MKYD6185S.080-P3-62015	6185 KYDEX .080"	5/07/12 Yes	1,074.66 sf	TST ground	\$8.2716	\$8,889.14
		Special Inst:	MATERIAL: KYDER 6185, COLOR CODE: IVORY 62015 TEXTURE: P-3 VELOUR MATTE SHEET SIZE: 52" X 96" X 31 SHEET = 1074.6584 SF				
						PO Total:	\$8,889.14

MATERIAL CERTIFICATION  
REQ'D UPON DELIVERY

Change Nbr: 1

Change Date: 4/13/12

No substitution or déviation without  
consent.  
Certificate of Conformity or Material  
Certification required when applicable